CITY OF MIAMI BEACH

1700 CONVENTION CENTER DRIVE, MIAMI BEACH FL 33139-1824



FINANCE DEPARTMENT Telephone (305)673-7420 Fax (305)673-7004 NON-PROFIT VENDOR AND DISTRIBUTOR PERMIT APPLICATION Dates Permit requested for through (Directions on reverse side) Application must be legible(typed or printed). No Corrections Allowed. A new application will have to be submitted Full Name of Non-Profit Organization(ATTACH VAIID 501C(3) CERTIFICATE) Date Address of Organization, City, State, Zip E-Mail Address Phone# Printed Full Name of Non-Current Fax Social Security Number Profit Vendor or Distributor Address Day Other Printed Names of Persons Vending or Social Security Number Distributing at Location (If different from above) Description of Merchandise to be Vended or Distributed(7) Mission(8) I agree to hold harmless the City and it's elected and appointed officials, employees, agents and independent contractors from and against any and all actions, lawsuits, claims, liabilities, damages, judgments, sums of money, losses and expenses in law or in equity, including, but not limited to, attorneys' fees and cost at the trial court and all appellate levels which may arise or be alleged to have arisen in connection with the selection process, my presence and vending and/or performing activities on or about public property. I HAVE READ AND UNDERSTAND CHAPTER 86 ARTICLE III OF THE MIAMI BEACH CITY CODE

SIGNATURE(Authorized Director/Officer of Org)

(9)
Fees \$15.00 Account #011.8000.36999

DATE

PROVISIONS.

FAILURE BY THE CITY TO RECEIVE THE ORIGINAL FULLY COMPLETED LEGIBLE APPLICATION/\$15.00 FEE AND AUTHORIZATION LETTER(IF NEEDED) BY FIVE (5) BUSINESS DAYS PRIOR TO THE LOTTERY DATE AT **5PM** WILL DISALLOW YOUR ORIGANIZATION FROM PARTICIPATION IN THIS LOTTERY. ANY MISINFORMATION OR MISREPRESENTATION WILL ALSO BE GROUNDS FOR DISQUALIFICATION.

REGARDING NON-PROFIT VENDING AND DISTRIBUTION AND AGREE TO COMPLY WITH ITS